

updated per Amends. 2.23.04

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10035594		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	1		1				51				
2				1			52				
3				1			53				
4			1				54				
5				1			55				
6				1			56				
7				1			57				
8				1			58				
9				1			59				
10				1			60				
11			1				61				
12				1			62				
13				1			63				
14							64				
15							65				
16			1				66				
17							67				
18				5			68				
19				5			69				
20				5			70				
21				5			71				
22				5			72				
23				5			73				
24							74				
25				5			75				
26				5			76				
27				5			77				
28				1			78				
29				1			79				
30				1			80				
31				5			81				
32				1			82				
33				5			83				
34				5			84				
35							85				
36							86				
37							87				
38							88				
39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	1		4				TOTAL IND.				
TOTAL DEP.	33		74				TOTAL DEP.				
TOTAL CLAIMS	34		78				TOTAL CLAIMS				

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADAMENDMENTS

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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